

**Amendments to the Specification:**

[Para 58] Fig. 10 is a diagrammatic perspective view of a lung, inverted relative to its Fig. 9 position, having the sealant plug positioned therewithin as a result of the tenth and final step of the first embodiment;

[Para 18] Where a sealant plug of cylindrical configuration having a preferred predetermined length of about two and one-half centimeters (2.5 cm) is used, a distance "d" is calculated by adding two centimeters (2.0 cm) to distance "a." If a plug having a predetermined length of 1.5 cm is used, distance "d" is calculated by adding 1.0 cm to distance "a." If a plug having a predetermined length of 3.0 cm is used, distance "d" is calculated by adding 2.5 cm to distance "a." The distance added to distance "a" must position the leading end of the plug at a depth in the biopsy tract such that about one-half centimeter (0.5 cm) or less of the trailing end of the plug protrudes out of the biopsy tract, beyond the surface of the lung or other internal organ, for a plug of any length. Thus, a preselected length such as about half a centimeter or less is subtracted from the length of the sealant plug to arrive at a first value expressed in units of length, and that length first value is added to distance "a" to arrive at a second value distance "d" expressed in units of length. The biopsy tract formed in the internal organ is then plugged by introducing a leading end of said sealant plug into the biopsy tract to a depth equal to said second value so that a trailing end of the sealant plug is flush with or extends slightly above a surface of the internal organ.

[Para 72] Fig. 2 is a diagrammatic representation of patient's skin 22 (in this case chest skin), lung surface 20 (the pleural layer), and lesion 16. The point of needle entry in skin 22 is denoted 24. The distance from said point of entry 24 to pleural layer 20 of the lung is denoted by the reference letter "a" and the distance from pleural layer 20 to lesion 16 is denoted by the reference letter "b." The bore formed by the needle from point 24 to pleural layer 24 is referred to as an access channel. The bore formed from point 24 to lesion 16 is the biopsy tract. The access channel and the biopsy tract collectively form a single bore but it should be understood that the biopsy tract, not the access channel, is sealed with the sealant plug.